

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			★		★		★	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51		2				
2		1					52		2	?			
3		1					53		2	?			
4		1					54		2	?			
5		1					55		2				
6		1					56		2				
7		1					57		2	?			
8	1						58		2				
9		1					59		2				
10		1					60		1				
11		1					61		1				
12		1					62		1				
13	1						63		1				
14		3					64		3				
15		1					65		3				
16		1					66		1				
17		1					67		1				
18		1					68		1				
19		1					69		1				
20	*	1					70		1				
21		1					71		1				
22		1					72		1				
23		1					73		1				
24		1					74		1				
25		1					75		1				
26		1					76		3				
27		1					77		3				
28		1					78		3				
29		1					79						
30		1					80						
31		3					81						
32		3					82						
33	1						83						
34	1						84						
35		1					85						
36		1					86						
37		1					87						
38		1					88						
39		1					89						
40		1					90						
41	1						91						
42		1					92						
43		1					93						
44		1					94						
45		2					95						
46		1					96						
47		7					97						
48	1						98						
49	1						99						
50		2	?				100						
TOTAL IND.		↓		↓		↓	TOTAL IND.	8	↓		↓		↓
TOTAL DEP.		↓		↓		↓	TOTAL DEP.	103	↓		↓		↓
TOTAL CLAIMS							TOTAL CLAIMS	111					

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

CLAIMS ONLY							SERIAL NO.	FILING DATE
							APPLICANT(S)	
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.	*	*
1	1							
2		1						
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6		1						
7		1						
8	1							
9		1						
10		1						
11		1						
12		1						
13	1							
14		3						
15		1						
16		1						
17		1						
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29		1						
30		1						
31		3						
32		3						
33	1							
34	1							
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38		1						
39		1						
40		1						
41	1							
42		1						
43		1						
44		1						
45		2						
46		1						
47		7						
48	1							
49	1							
50		2						
TOTAL IND.		↓		↓		↓		
TOTAL DEP.		↓		↓		↓		
TOTAL CLAIMS								

51		12						
52		12						
53		12						
54		12						
55		2						
56		2						
57		12						
58		3						
59		2						
60		1						
61		1						
62		1						
63		1						
64		3						
65		3						
66		1						
67		1						
68		1						
69		0						
70		0						
71		0						
72		1						
73		1						
74		1						
75		1						
76		3						
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98								
99								
100								
TOTAL IND.		↓		↓		↓		
TOTAL DEP.		↓		↓		↓		
TOTAL CLAIMS								

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